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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Ara Kulidjian
 Serial No. 10/674,190
 Filing Date: September 29, 2003
 Confirmation No.: 4146

Examiner: Stephen J. Cherry
 Art Unit: 2863
 Docket No.: 00100.02.0035

Title: METHOD AND APPARATUS FOR AUTOMATED TESTING OF DISPLAY SIGNALS

Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

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March 14, 2005


Barbara Hannon

AMENDMENT

Dear Sir:

In response to the Office Action of December 14, 2004, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims which begin on page 2 of this paper.

Arguments/Remarks begin on page 8 of this paper.

VEDDER PRICE

VEDDER, PRICE, KAUFMAN & KAMMHOLZ, P.C.
 222 NORTH LASALLE STREET
 CHICAGO, ILLINOIS 60601
 312-609-7500
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Name: U.S. Patent and Trademark Office
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Message:

U.S. Patent Application No. 10/674,190 filed September 29, 2003, Docket No. 00100.02.0035

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Barbara G. Hannon
 Barbara G. Hannon

PTO/SB/17 (10-04v2)
Approved for use through 07/31/2005. OMB 0651-0032
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FEE TRANSMITTAL for FY 2005

Effective 10/01/2004. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT	(\$ 600.00)
-------------------------	-------------

Complete if Known	
Application Number	10/674,190
Filing Date	September 29, 2003
First Named Inventor	Kulidjian
Examiner Name	Stephen J. Cherry
Art Unit	2753
Attorney Docket No.	00100.02.0035

METHOD OF PAYMENT (check all that apply)

Check Credit card Money Order Other None

Deposit Account:

Deposit Account Number	50-0441
Deposit Account Name	ATI International SRL

The Director is authorized to: (check all that apply)

- Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) or any underpayment of fee(s)
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity	Small Entity
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Fee Code (\$)	Fee (\$)	Fee Code (\$)	Fee (\$)	Fee Description	Fee Paid
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for ex parte reexamination	
1804	920*	1804	820*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	
1252	430	2252	215	Extension for reply within second month	
1253	980	2253	490	Extension for reply within third month	
1254	1,530	2254	765	Extension for reply within fourth month	
1255	2,080	2255	1,040	Extension for reply within fifth month	
1401	340	2401	170	Notice of Appeal	
1402	340	2402	170	Filing a brief in support of an appeal	
1403	300	2403	150	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1,370	2453	685	Petition to revive - unintentional	
1501	1,370	2501	685	Utility issue fee (or reissue)	
1502	490	2502	245	Design issue fee	
1503	660	2503	330	Plant issue fee	
1450	130	1450	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1806	180	1806	180	Submission of Information Disclosure Stmt	
8021	40	8021	40	Recording each patent assignment per property (if more than number of properties)	
1609	790	2809	395	Filing a submission after final rejection (37 CFR 1.128(a))	
1810	790	2810	395	For each additional invention to be examined (37 CFR 1.129(b))	
1801	790	2801	395	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	

SUBTOTAL (1) (\$ 600.00)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
Independent	-20** =	X	
Multiple Dependent	- 3** = 3	X 200	= 600

Large Entity Small Entity

Fee Code (\$)	Fee (\$)	Fee Description
1202	18	2202 9 Claims in excess of 20
1201	88	2201 44 Independent claims in excess of 3
1203	300	2203 150 Multiple dependent claim, if not paid
1204	88	2204 44 ** Reissue independent claims over original patent
1205	18	2205 9 ** Reissue claims in excess of 20 and over original patent

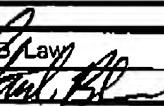
SUBTOTAL (2) (\$ 600.00)

**or number previously paid, if greater. For Reissues, see above

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)

(Complete if applicable)				
Name (Print/Type)	Patrick B. Law		Registration No. (Attorney/Agent)	41,549
Signature			Telephone	312-609-7799
Date	3/14/05			

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PTO/SB/21 (08-03)

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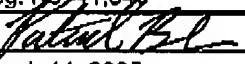
Total Number of Pages in This Submission

Application Number	10/674,190
Filing Date	September 29, 2003
First Named Inventor	Ara Kulidjian
Art Unit	2863
Examiner Name	Stephen J. Cherry
Attorney Docket Number	00100.02.0035

ENCLOSURES (Check all that apply)

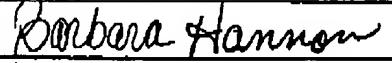
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Patrick B. Law Reg. No. 21,549
Signature	
Date	March 14, 2005

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Signature		Date	March 14, 2005

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